

CLAIMS ONLY							Application Number <div style="font-size: 24px; font-weight: bold;">10526729</div>		Filing Date		
							Applicant(s)				
							* May be used for additional claims or amendments				
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT						
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	
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Claims											

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Applicant(s)

[illegible]

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
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Total Indep	2					
Total Depend	10					
Total Claims	12					

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	Indep	Depend	Indep	Depend	Indep	Depend
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Total Depend						
Total Claims						